

ZipS

Zero to age 21: Information
Promoting Success for Nurses
working with Kansas Kids

JULY 2004



Infant Formula Update-Cow Milk- Based Formulas by Sandy Perkins, MS, RD

The best source of nutrition for infant feeding is human milk. Human milk provides infants with appropriate nutrients, offers immune factors not yet duplicated in infant formula, and encourages intimate contact between mother and infant. Even so, by two months of age, most infants in North America are formula fed. When breastfeeding is not possible, an iron fortified infant formula is the best alternative.

The main difference between formulas marketed for healthy full term infants is the source of carbohydrate, fat, and particularly protein. The protein source may be cow milk, soybean or a protein hydrolysate. This article discusses the various cow milk based infant formulas currently available in the United States; stay tuned for future articles on other infant formulas.

Standard cow milk-based formula is the feeding of choice when breastfeeding is not used or is stopped before one year of age. In milk-based formulas, cow milk is modified to formulate a formula product which is "more like breast milk." All milk-based formulas on the market have many similarities, but also some differences. The protein content of milk-based formulas is higher than human milk. The fat source is a mixture of various vegetable oils selected to simulate human milk. The carbohydrate source in human milk and all the milk-based formulas is lactose. The most common milk-based formulas on the market are Enfamil, Good Start Essentials and Similac. Store brands of milk based formulas are distributed by Dillons, Food 4 Less, HyVee, Osco, Save-A-Lot, Walgreens, Wal-Mart, and Target. The store brands must meet the same basic nutritional guidelines as the name brands.

Milk-based infant formulas with the additional nutrients DHA (docosahexaenoic acid) and ARA (arachidonic acid) added have recently shown up on the market. DHA and ARA are long-chain polyunsaturated fatty

acids which are found naturally in breast milk. Some studies in infants suggest that including these fatty acids in infant formula may have positive effects on visual function and neural development. While some of these studies do show benefits, others have not and the most common conclusion is that we need more research, especially in the area of long term effects. The most common DHA and ARA enhanced milk-based formulas are Enfamil LIPIL and Similac Advance. The store brands of DHA and ARA enhanced milk-based formulas are becoming more readily available.

There are no real differences between the various lactose containing, milk-based formulas which would support why one would be better tolerated than another. However, there frequently are testimonials that one formula is tolerated better than others. These reports of "formula intolerance" most commonly include that the babies are spitting up, have diarrhea, colic, and/or constipation. These symptoms could be caused by many factors, including incorrect formula dilution or an unsafe water supply, preparing the formula in an unsanitary environment, and inappropriate feeding practices. Common inappropriate feeding practices include early introduction of solids and juices, improper burping or handling of infant during feedings. Many infants routinely spit up after eating. Spitting up is usually a developmental issue, specifically the muscles in the digestive tract. This is not a reason for concern, as long as the infant is generally happy and gaining weight.

Lactofree and Similac Lactose Free are milk-based, lactose-free formulas. The carbohydrate source for these products is corn syrup solids. It is rare that an infant would need a lactose-free feeding with cow milk protein. Some feeding problems which might be related to lactose are gas, bloating, abdominal cramping, and diarrhea. Switching from a milk-based formula with lactose to one without lactose due to "intolerance" or "colic," is, as yet, without justification. However, it may be that infants on lactose-free formulas have less gas production and perhaps this is the reason for the apparent improvement when a lactose-free formula is fed.

Next issue, Soy-Based Infant Formulas.

Welcome to ZIPS: **Zero to Age 21: Information Promoting Success for Nurses working with Kansas Kids.** We hope this newsletter continues to be a useful resource for you, and encourage you to give us your comments, feedback, and suggestions. Also, note that previous months' issues of the ZIPS can be found at: <http://www.kdhe.state.ks.us/c-f/zips/>

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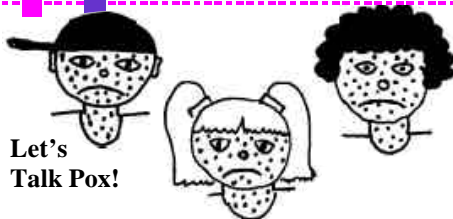
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ZIPs: Perinatal Health



Chickenpox (the varicella virus) is a common malady of childhood and one which some pregnant women are susceptible. Between 5 percent and 15 percent of pregnant women are susceptible to the varicella virus. Especially those who come into contact with close family members.

In mothers who contract varicella infection before 20 weeks of gestation, the risk to the fetus may include any of the following which is known as varicella syndrome: scars, defects of muscle and bone, malformed and paralyzed limbs, a smaller-than-normal head, blindness, seizures and mental retardation. This syndrome affects about two percent of infants whose mothers contract the varicella virus before 20 weeks of gestation and occurs only rarely in infants whose mothers contract varicella after 20 weeks of gestation.

The newborn infant can develop a severe chickenpox infection if the mother develops a skin rash (due to varicella infection) between 2-5 days before delivery. Further, between 25-50 percent of infants become infected and develop rashes from 5-10 days after birth. If left untreated, up to 30 percent of infants with this condition die.

A susceptible pregnant woman should receive VZIG (varicella-zoster immune globulin) after coming into contact with someone known to be infected with chickenpox. This particular vaccine is safe for use for both the mother and her infant. When given within 72 hours after exposure, VZIG helps reduce the severity of chickenpox or to prevent it entirely.

For more information on this topic go to: <http://www.modimes.org> or <http://www.aap.org> and search for chickenpox or varicella-zoster infection.

The second edition of the **Folic Acid Update** letter is now available on CDC's new folic acid Web site at: <http://www.cdc.gov/node.do?id=0900f3ec80010af9>



The presence of fetal fibronectin (fFN) in the cervico-vaginal secretions of pregnant women having symptoms of pre-term labor from 22-34 weeks of gestation indicates increased risk for preterm delivery. However, the absence of fetal fibronectin (fFN) is a better indicator of the pregnancy lasting another two weeks.

Fetal fibronectin is a protein produced during pregnancy which acts as a "biological glue" attaching the fetal sac to the uterine lining. It is usually present in the cervico-vaginal secretions up to the first 22 weeks of pregnancy, then recurs during the last one to three weeks of pregnancy. Therefore, the absence of fetal fibronectin from 22-34 weeks is an important indicator of a normally progressing pregnancy.

Some leading risk factors that may indicate a premature delivery outcome are: a previous pre-term birth, multiple pregnancy, incompetent cervix, uterine abnormalities and amniotic fluid infection. For more information on this and other topics related to prematurity go to: <http://www.modimes.org>



Of Peanuts and Folic Acid: Pregnant women and nursing mothers of infants who have strong family histories of peanut and other food allergies should take extra caution when considering the consumption of foods made with peanuts. Studies suggesting the use of peanuts as a good source of protein and folic acid are extensive. However, the effect on infants who are breastfed are few in number. What we do know, however, is there are

"Generosity is giving more than you can, and pride is taking less than you need."

Kahlil Gibran

some studies which indicate sensitization effects in fetuses whose mothers have peanut allergies. Further, this would seem to lead to the conclusion that women with a strong family history of peanut allergies to avoid peanuts and peanut products while pregnant and breastfeeding. This should, in turn, help to reduce the likelihood of their infants developing peanut allergies. For more information on peanut allergies refer to the March of Dimes Recommendations on the Consumption of Peanuts.

Stillbirth: Some Probable Causes:

Stillbirth is defined as the death of a fetus after 20 weeks of pregnancy. A fetal death occurring before 20 weeks of pregnancy is referred to as a miscarriage. Parents are often unprepared for the outcome of stillbirth because these pregnancies are progressing normally for the most part. Therefore, it is incumbent upon those of us who care for these individuals to be acutely aware of the substantial impact of our thoughts, words, and actions upon these parents during this most difficult life event.

Some of the most common causes of stillbirth are: placental abruption (50 percent more likely in women who smoke, those women who are substance abusers, especially cocaine, and women who are preeclamptic), infants who have chromosomal abnormalities (about 5-10 percent), infants who are small for gestational age, and bacterial infections which may show no evidence of infection in the mother.

For more information refer to the March of Dimes impact statement on birth defects and stillbirth. Go to: <http://www.modimes.org>.



For the most current information from the American Academy of Pediatrics about **Immunization of pre-term and low birth-weight infants** visit: http://www.guideline.gov/summary/summary.aspx?view_id=1&doc_id=4251

ZipS: Child Health

*Fault finding without suggestions
for improvement is a waste of time.*
- Ralph C. Smedley.



"**Healthy Child Care**" is a bimonthly publication by Healthy Child Publications, in Harbor Springs, MI. It contains great health and safety information and ideas for young children. The price is \$19.99 a year. For more information you can call – 231-526-6342 or visit their Web site at: <http://www.healthychild.net>



'Metabolic Syndrome' Seen in Obese Children and Adolescents:

"Metabolic Syndrome," a combination of factors believed to be present at birth that make individuals susceptible to cardiovascular disease, was identified in many of 439 obese children and adolescents who were studied by researchers from the Yale University School of Medicine and Cincinnati Children's Hospital. http://www.healthinschools.org/2004/jun03_alert.asp



The role of **fatherhood** changed dramatically in the 1970s. The father's traditional place in the family was as the financial provider and guardian of the family values. Many fathers today are committed to being the children's nurturer and wife's partner in homemaking. Research indicates that fathers as well as mothers bond to their baby shortly after birth and contribute significantly to their child's emotional, social, and intellectual development. For more information about fatherhood initiatives you can contact the National Fatherhood Initiative at: 800-790-DADS or visit: <http://www.fatherhood.org>



"Loving Discipline for Children Ages 1 through 5" is a Parent's Handbook

that describes general patterns of growth and development. All children grow and develop in their own unique way. Your child may not exactly follow the patterns described in this handbook. Consult

your child's health-care provider if you have questions. To find out more information about this handbook visit: <http://www.channing-bete.com>



Is Your Child Ready to Graduate to the Next Child Safety Seat Yet? is a poster available through the National Safe Kids Campaign. The cost of this poster is \$2.00 and when ordering request ID#3234. For more information call 1-800-289-0117 or visit the National Safe Kids Web site at: <http://www.safekids.org>.

PEDIATRICS

The May 2004 issue of Pediatrics has a supplement titled **The Medical Home**, which pulls together in one location a large body of research on the cost and quality benefits of providing a medical home -- a central source of health care for infants, children, adolescents, young adults, and particularly children with special health care needs that is accessible, family centered, comprehensive, continuous, coordinated, compassionate, and culturally effective. Articles in the supplement document the vision of the medical home and present practical tools and methods that have proved successful in overcoming recognized barriers to care. The supplement also includes the American Academy of Pediatrics' 2002 policy statement on the medical home and a list of helpful Web sites. The supplement is available to Pediatrics subscribers at <http://pediatrics.aappublications.org/> or by viewing this info from: Onniges TF, Palfrey JS. 2004. The medical home. Pediatrics 113(5, Part 2):1471-1548.



Orange County Newspaper investigation about lead in candy! Orange County newspaper did a six part investigation story about lead in candy. It is a great article and it has picture of the candy. To see this picture and read more about this topic visit: <http://www.ocregister.com/investigations/2004/lead/intro.shtml>.



Authors Explore MCH

Educators' Health Promotion Content Needs and Interests

by an online needs assessment tool. The findings of this survey included: ? A majority of the respondents had backgrounds in nursing (41 percent), public health (27 percent), or medicine (27 percent). ? Although day-long seminars or lectures were the preferred continuing education methods, over one-third preferred Web-based study. ? A majority of the respondents agreed or strongly agreed that they were confident in their ability to use the specified teaching strategies yet would like to improve their ability to use the strategies. ? A majority of the respondents agreed or strongly agreed that they were confident in their ability to teach the six health promotion concepts yet would like to improve their ability to teach the concepts. ? Ninety-six percent of respondents agreed or strongly agreed that they were confident in their ability to use e-mail. For other computer skills and technologies, the percentages were as follows: word processing -- 88, using search engines -- 80, "surfing" the Internet -- 78, using CD-ROMs -- 75, uploading/downloading -- 71%, using PowerPoint -- 62, using chat rooms -- 21, and using video streaming -- 15. "These findings have helped to inform the development of a Bright Futures-based health promotion distance learning program *Pediatrics in Practice* (<http://www.pediatricsinpractice.org>) available in paper-based and online formats," conclude the authors. Bernstein HH, Rieber S, Stoltz RA, et al. 2004. Assessing the learning needs of maternal and child health professionals to teach health promotion. *Maternal and Child Health Journal* 8(2):87-93

The National Campaign to Prevent Teen Pregnancy announces the release of **Early Childhood Programs**. Research suggests that children's experiences in programs many years earlier may also contribute to a reduced likelihood that they will become parents too soon. Go to: <http://www.teenpregnancy.org/works/pdf/ScienceSaysEarlyChildhood.pdf>.

Zips: Adolescent Health

Teamwork is a constant balancing act between self-interest and group interest.

Susan M. Campbell



Adolescents in Many Countries Experience Violence, but U.S. Has More Deaths:

A study reported in the June issue of Archives of Pediatrics and Adolescent Medicine found that U.S. teenagers are no more prone to violence than their counterparts in four other countries (Ireland, Israel, Portugal, and Sweden), but violence among teens in the U.S. is more likely to result in death. http://www.healthinschools.org/2004/jun08_alert.asp.

The New York Times

New York Times Examines Debate Over Effectiveness of Abstinence-Only Sex Education: The New York Times recently examined the ongoing debate over the effectiveness of abstinence-only sex education for middle school and high school students in the United States. The "push" for abstinence-only sex education began in 1998 when states became eligible to receive federal matching funds for money spent on sex education programs that encourage students to wait until marriage to have sex and that do not include information about contraceptives, the Times reports. Advocates of the approach say it has resulted in a decline in teen pregnancy and birth rates, citing the fact that the U.S. teen birth rate currently is at its lowest level in 30 years. However, certain teen sexuality experts have collected "ample evidence" demonstrating that abstinence-only education is "not adequate" to protect young people from unwanted pregnancies and sexually transmitted diseases, according to the Times. In addition, there is "considerable evidence" that comprehensive sex education -- which encourages abstinence among teenagers but also provides information about contraceptives -- reduces the incidence of teen pregnancy and STDs, the Times reports (Brody, New York Times, 6/1: <http://query.nytimes.com/gst/abstract.html?res=F00914FC3D550C728CDDAF0894DC404482>)

Introducing the Suicide Prevention Resource Center (SPRC) e-newsletter,



The Spark! The Spark will be published periodically throughout the year and will be archived on the SPRC Web site at <http://www.sprc.org/news/index.asp>.

Fact Sheet: What Docs Should Know About: The Impact of Teen Pregnancy on Young Children:

Now available for free download is a fact sheet discussing the impact of teen pregnancy on young children. The fact sheet was developed jointly by the National Campaign and Docs for Tots, a nonpartisan, multi-faceted, advocacy organization, specifically focused on very young children and their families. It can be downloaded at <http://www.teenpregnancy.org/resources/reading/pdf/tots.pdf>. For more information on Docs for Tots, visit their Web site at <http://www.docsfortots.org>.



BE SEXY: It Doesn't Mean You Have to Have Sex. The National Campaign's online store is offering a limited number of the Candies Foundation BE SEXY Tank Tops. The white tanks feature the above signature phrase, and have been seen on such celebrities as Ashanti, Michelle Branch and Jenny McCarthy. For details, please visit: <https://www.teenpregnancy.org/store/item.asp?productId=283>.



National Institutes of Health Launches Expanded Health Information Web Site:

A Great Resource Made Better for Health and Science Educators, Students, Researchers, and Writers Needing In-Depth or Background Materials and Resources. Where? <http://health.nih.gov/>

The National Institutes of Health (NIH) has expanded its health information Web site, offering easier and broader access to NIH's valuable resources--a treasure trove for health and science educators, students, researchers, and writers needing background information on health topics.

New Version Offers Three Search

Options, Cutting-Edge Science, and Interactive Features. In addition to colorful images, visitors can test their health knowledge. Information can be accessed using the popular "A to Z" listing of health topics, browsed by body location/systems, or searched using the main "Search" box. Favorite health databases, such as Clinical Trials, MEDLINEplus, and PubMed, remain just one click away.

The Web site includes three colorful new feature sections.

? "Healthy Lifestyles" highlights links to popular topics such as seasonal health concerns, nutrition, and weight loss.

? "Research In Action" links users to cutting-edge scientific information on topics such as stem cells and genetics, and provides readers with an opportunity to meet scientists ranging from high school students to Nobel Laureates.

? "Now Online" Is Practical, Interactive, and FUN. In "Now Online," you'll find the Portion Distortion quiz, the Household Products Database, and the Milk Matters campaign. You and your students can test your knowledge with the new "Take a Quiz" box, where true/false questions on hot topics, such as diabetes, osteoporosis, cancer prevention, and heart disease, continually rotate. Looking for a Way to Get Families Involved in Learning? The newly expanded site has information that will interest kids, teens, parents, and seniors. Educators, clinicians, researchers, and writers will find valuable resource of tools and guidelines.



Stop in at the **CDC Web site** for a wealth of information and

resources! You can access DASH and CDC's centers, institutes, and offices.

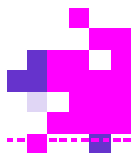
Featured this week on the CDC site :

? Tips for Travelers ? Surviving Cancer ? A 40th Anniversary Update from the Surgeon General on the Consequences of Smoking. <http://www.cdc.gov>



The June issue of the **Adolescent and School**

Health Newsletter is online. Check it out at: <http://www.astho.org/newsletter/newsletters/1/index.html>.



A
new
study

shows that state regulation of all-terrain vehicle (ATV) use by children under age 16 appears to be effective in decreasing the incidence of injury and death. Researchers at the universities of Michigan and North Carolina at Chapel Hill compared data from Pennsylvania, which has ATV helmet laws, and North Carolina, which does not impose helmet laws. The study looked at 858 children in Pennsylvania and 222 children in North Carolina who were admitted to level I or level II trauma centers for ATV injuries between January 1997 and July 2000. Findings were published in the April 2004 issue of *Pediatrics*. Read the full story at <http://www.unc.edu/news/newsserv/archives/apr04/keenan040704.html>.



In May, IAC updated its one-page information sheet "Reliable Sources of

Immunization Information: Where to go to find answers!" Intended for health professionals to give to parents and patients, the sheet lists Web site addresses, phone numbers, books, and videos that provide dependable immunization information. The sheet now includes ordering information for two videos produced by the Vaccine Education Center at The Children's Hospital of Philadelphia, "Vaccines and Your Baby" and "Vaccines: Separating Fact from Fear." It also has ordering information for the most recent editions of two books for parents, "Vaccines: What you should know" and "Vaccinating Your Child: Questions and answers for the concerned parent." New editions of both were published in 2003. To access a ready-to-copy (PDF) version of IAC's updated information sheet, go to: <http://www.immunize.org/catg.d/p4012.pdf>.

"Better Money Management -- A Guide For Reaching Your



Goals" (EM96311)H -
- the 36 page

interactive handbook helps families develop their own plan for financial stability. A good investment in families! Comments about this book: ? well-organized information on budgeting, financing, banking, and more -- delivered in easy-to-read language ? charts, fill-ins, and checklists for a hands-on approach to money management. ? A critical learning tool for young people ? will help prepare young people for a successful transition to independence and financial stability. Not only do they get guidance on managing money wisely, they also get a look at the benefits that come with good money management. For more information visit: <https://secure.channing-bete.com/cgi-bin/WebObjects/ecommm.woa/wa/promotion?p=1&code=G002Y>.



The Health Consequences of Smoking: A Report of the Surgeon General

updates the 1964 report on the health effects of active smoking. Prepared by the Centers for Disease Control and Prevention's Office on Smoking and Health, the report identifies a number of diseases of which smoking has been found to be a cause that were not previously causally associated with smoking, including cancers of the stomach, uterine cervix, pancreas, and kidney; acute myeloid leukemia; pneumonia; abdominal aortic aneurysm; cataract; and periodontitis. The report updates both the methodology for evaluating evidence and the conclusions from earlier reports concerning smoking as a cause of a particular disease. The report also outlines broad strategies and courses of action for tobacco control in the future. The U.S. Department of Health and Human Services has also released a companion database containing more than 1,600 articles cited in the report. The database can be used to find detailed information on the specific effects of smoking as well as to develop customized analyses, tables, and figures. The database will be updated as new studies are published. An animated Web site for the public has also been launched

to show the hazards of smoking and the benefits of quitting. The printed report, a full-color summary, the companion database, and the public Web site are available at: <http://www.surgeongeneral.gov/library/smokingconsequences/>.



An initiative to strengthen health care safety nets in our communities

Walking a Tightrope: The State of the Safety Net in 10 U.S.

Communities presents findings from safety net assessments across the country and identifies common characteristics, opportunities, and challenges for communities that wish to provide better health care to uninsured and underserved individuals. The report is a companion to individual safety net assessments conducted by the Urgent Matters program, a national initiative of the Robert Wood Johnson Foundation. Urgent Matters is based on the assumption that there is an important relationship between emergency department use and the performance of the health care safety net. The report illustrates differences among many of the communities and provides an overarching perspective of problems that affect safety nets across the country. The report is intended to inform the health care dialogues in these communities and the nation and to lay a foundation for change and improvement. The report and the Urgent Matters safety net assessments are available at: http://www.urgentmatters.org/about/sna_reports.htm#report.



Guidance is now available for the **The**

Rural Health Care Services Outreach Grant Program. It can be found on the

web at: <http://www.hrsa.gov/grants/preview/guidancerural/hrsa05011.htm>. The deadline for submission of applications is September 13. The Office of Rural Health Policy's Rural Health Care Services Outreach Grant Program encourages the development of new and innovative health care delivery systems in rural communities that lack essential health care services.

ZIPs: School Health

Be willing to make decisions. That's the most important quality in a good leader.
- T. Boone Pickens



One of the most common, most important, and least studied aspects of children's health care has been the **management of medications at school**. For the past six months, with support from the Agency for Healthcare Research and Quality and the Robert Wood Johnson Foundation, the Center for Health and Health Care in School has been exploring issues related to the safety and quality of medication management at school. An issue brief describing challenges and opportunities as well as information on an invitation workshop sponsored by the Center have been posted to the CHHCS Web site. For more information visit: <http://www.healthinschools.org/sh/medmgmt.asp>.



The **After School Alliance** has just released the results of the first national household study on how kids spend their after school hours. The study, *America After 3 pm*, finds that 14.3 million children take care of themselves after the school day ends, including almost four million middle school students in grades six - eight. Just 6.5 million children are in after school programs - but the parents of another 15.3 million children say their children would participate in after school - if a program were available. For more information or to view this report visit: http://www.afterschoolalliance.org/america_3pm.cfm.



The Economics of Obesity: A Report on the Workshop Held at USDA's Economic Research Service presents a summary of the papers and the discussions presented at the April 2003 workshop jointly hosted by the U.S. Department of Agriculture's Economic Research Service and the University of Chicago's Irving B. Harris Graduate School of Public Policy Studies and the George J. Stigler Center for the Study of the Economy and the State. The purpose of the workshop was to provide an overview of leading health economics research on the causes and consequences of rising obesity among children, adolescents, and adults in the United States. Topics included the role of

technological change in explaining both long- and short-term obesity trends, the role of maternal employment in child obesity, the impact of obesity on wages and health insurance, behavioral economics as applied to obesity, and the challenges in measuring energy intakes and physical activity. The workshop also discussed policy implications and future directions for obesity research. The report is available at <http://ers.usda.gov/publications/efan04004/>.



What happened when school nurses gave corticosteroids to some asthmatic children and others were treated at home? If you want to find out the answer to this question with further information visit: <http://www.healthinschools.org/ejournal/2004/june1.htm>.



Pediatrics Academy Urges School-Based Mental Health Services: More than 20 percent of children and adolescents have mental health problems, and school-based programs offer the promise of improving access to diagnosis and treatment of those problems, according to a position statement released this month by the Committee on School Health of the American Academy of Pediatrics (AAP). http://www.healthinschools.org/2004/jun04_alert.asp.



"How To Manage Your Child's Life-Threatening Food Allergies: Practical Tips For Everyday Life" is a comprehensive, detailed reference manual that teaches parents of children with potentially fatal food allergies how to keep their children safe and alive in our food-filled world. Topics covered include creating a safe school environment, preparing for and treating allergic reactions, purchasing and cooking food, making the home a "safe haven," parenting issues, having a social life, dining in restaurants, traveling, and more. Numerous checklists, sample forms, and real-life examples are included. For more information visit: <http://www.foodallergybooks.com/>.



Pediatrics Academy Urges School-Based Mental Health Services: More than 20 percent of children and adolescents have mental health problems, and school-based programs offer the promise of improving access to diagnosis and treatment of those problems, according to a position statement released this month by the Committee on School Health of the American Academy of Pediatrics (AAP). http://www.healthinschools.org/2004/jun04_alert.asp.

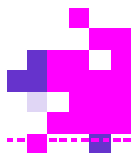


"Emergency Preparedness: A Quick Guide for School Staff" provides an overview with examples and resources for developing key components of a school response to emergencies. Includes emergency plan development, selection of a crisis response team, and communications planning. <http://www.healthinschools.org/sh/emerg.asp>.



Article Summarizes Efforts to Enable Schools to Help Prevent Chronic Disease: "Modern, coordinated school health programs could provide one of

the most efficient means our nation could employ to prevent some of its most serious health problems -- especially chronic diseases," state the authors of an article published in the May/June 2004 issue of *Public Health Reports*. The article describes national strategies developed by the Centers for Disease Control and Prevention (CDC) and its partners to help the nation's schools reduce chronic disease risks (i.e., tobacco use, unhealthy eating patterns, inadequate physical activity, and obesity). Information on materials, resources, and partner activities that comprise the strategies is included. Kolbe L, Kann L, Patterson B, et al. 2004. Enabling schools to help prevent chronic disease and other serious health problems. *Public Health Reports* 119(3):286-302.



Zips: Events and Resources

*Salvation does not come
through simplicities.
- A. Bartlett Giamatti*



LEADERSHIP

NURSING

is a program
open to all

Kansas State Nurses Association (KSNA) members and is **free**. Pre-registration is encouraged but not mandatory. Call the KSNA Office to register at: 785-233-8638 or email ksna@ksna.net. This program is approved for two contact hours applicable for RN and LPN re-licensure. DATE: Monday, July 19, 2004, TIME: 10:00 a.m. – 2:00 p.m. PLACE: Kansas State Nurses Association 1208 SW Tyler, Topeka, Ks. OVERVIEW:

- Introductions
- Principles of Leadership
- Overview of the Discipline of Nursing – Standard Setting Responsibilities
- Broadening Leadership Horizons – Meeting Protocol, Media Training, Legislative Empowerment
- Wrap-Up Questions and Answers

The Kansas Asthma Coalition will be meeting at the Johnson County Health Department on July 22 from Noon -3:30 p.m. The Johnson County Health Department is located at 11875 S. Sunset, Suite 300 in Olathe. If you are interested in attending in person or joining the meeting via conference call, please contact Lynne Crabtree from the American Lung Association of Kansas office in Topeka, at 785-272-9290 or 800-586-4872 ext. 101.



Kansas School Nurse Conference – “**Professionalism and Advocacy: Strengthening the Future for Kansas Children**” will be held at the

Hyatt Regency Hotel, in Wichita, July 26-29th. For more information and to view a conference brochure visit: <http://www.webs.wichita.edu/continuinged/ksn.htm>



IAQ TFS Web conference, to be held on July 14. The topic of the next Web

conference call is “Proper Building Maintenance for Summer Months”. For information about the upcoming Web conference call, please call 202-343-9385 or e-mail anderson.rob@epa.gov. This is a great opportunity for learning, without leaving the workplace!



2004 National Standardized Child Passenger Safety

Training Programs in Kansas 32 hour classes:

Dates: Location: Contact:
6/23 – 26 Wichita Pam Sestini 316-962-2337

7/1, 7/2, 7/15/7/16 Clay Center Pam Kemp: 785-632-2166

8/10 – 13 Dodge City Jeff Halloran (KSBE0) 1-800-416-2522 (lodging included)

9/28 – 10/1 Pottawatomie county Tim McCool (KHP) 785-296-3102

For more information contact: Jeff Halloran at 1-800-416-2522 or e-mail him at: jhalloran@dccca.org

Job Opportunity: MANAGER -

NATIONAL POLICY: Major non-profit health org. seeks a Manager to assist with planning, implementing & directing public policy development & implementation. Policy focus includes asthma; indoor and outdoor air quality and health issues. Represents the org before federal agencies & develops policy materials. Qualified candidate will have a Bachelor's degree in public health, health policy, political science or related area. Master's degree pref'd. 5 yrs' public policy exp as public health prof'l. Excel oral & written comm. skills. PC proficiency (MS Office). Send/ e-mail resumes w/ salary req'mnts to: ALA/MNP, 1150 18th Street, NW, Suite 900, Washington, DC 20036, fax # (202) 452-1805. E-mail: jmahumed@lungusadc.org.

Save the Dates! The Second Annual Public Health Nursing Conference will be held in Wichita at the Airport Hilton Hotel on **April 12-14, 2005**. This year the Bureau for Children, Youth & Families Maternal Child Health (MCH) Staff will be collaborating with the Office of Local & Rural Health to offer MCH tracks for staff

to attend during this conference. Upcoming information will be provided in the future for this conference!



The Second Annual Kansas Conference on Poverty: “Team Up Take Action” will be held on July 14-16 at the Ramada

Inn Hotel in Topeka. For information and to register for this event visit: <http://www.kacap.org/UpcomingEvents/conferenceintropage.htm>



We just passed the first anniversary of implementation of federal protections for the privacy of individual health

information under the Privacy Rule, issued pursuant to the **Health Insurance Portability and Accountability Act - HIPAA**. As you know, the HIPAA Privacy Rule provides new federal protections for personal health information held by providers and health plans, and gives patients an array of rights with respect to that information. At the same time, the Privacy Rule is balanced so that it permits the disclosure of personal health information needed for patient care and other important purposes. As hospitals and other covered entities continue to implement these Privacy Rule protections, we want to be sure that you are aware of the wide variety of helpful guidance and technical assistance materials the Department of Health and Human Services has published and made available at: <http://www.hhs.gov/ocr/hipaa/>.



In 2003, Delta Dental Plan of Kansas created a new nonprofit, charitable organization, the **Delta Dental Plan of Kansas Foundation**. Goals of the foundation are to provide grants to fund projects that will increase access to dental care for underserved populations, build the capacity to provide dental care, increase public awareness of oral health, and work to promote the prevention of oral disease. For more information on this new grant-making program go to the Web site: <http://www.deltadentalksfoundation.org/GGuid.htm>